SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Sideature X		
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No		
KEVIN BUTTER TOWERS SAND AND GRAVEL 760 N HARRISVILLE RD			
HARRISVILLE UT 84404	3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.		
EB 5-15-12 M1057/0006	4. Restricted Delivery? (Extra Fee) ☐ Yes		
2 Article Number	1160 0003 0191 8878		
PS Form 3811, February 2004 Domestic Ret	tum Receipt 102595-02-M-1540		

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KEVIN BUTTERS Sent T

TOWERS SAND AND GRAVEL

760 N HARRISVILLE RD or PC HARRISVILE ET 84404

See Reverse for Instructions